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Dr Chapman commenced his course of Lecture for the Summer Session of 1835. with considerations on Fever. he discards the idea of Diaspathic fever altogether & says that it is always purely Symptomatic. Fever, always commences by a local irritation or morbid excitement, which is extended by various Sympathie to the different tipues of the body. The nervous System receive the primary impression, which, from its situation, when injured, must produce similar effects on the System generally. Let us suppose, then that a febrific agent acts primarily upon the nerves of the stomach, or skin or any other part of the body. The impression produced, will be conveyed to the Sensorium Commune whence its will be reflected throughout the whole nervous System. But as the various organs & Structures of the System are endowed, each with its own peculiar modifications of the vital properties, Some may be insensible, whilst others, perhaps, are peculiarly susceptible of receiving & responding to the reflected morbific impression, and these, it may be reasonably supposed, will be irritated and functionally deranged, before the other organs or Structures become affected. From the part thus primarily irritated, the morbid excitement passes from organ to organ or tipue to tipue, according to their various Sympathetic relations

with each other & with the part primarily affected, until the whole System becomes morbidly excited. Any of the various tissues of the body may be seat or origin of Fever although the mucous Membrane of the Stomach from its exposed condition is the most General seat, but not the constant one as Broussais contends. Dr Chapman divides Fever into Inflammatory & Congestive.

Intermittent Fever

By an intermittent we understand a disease, where there are successive paroxysms, with regular intermissions, technically denominated Apyrexia. This disease receives different names according to the returns of the paroxysm, viz: quotidian when there is a daily return, tertian every third day; Quartan, Quintan Sextan & so on when repeated on the 4th 5th 6th & 7th. The tertian is the most common, next to that is the Quartan, the former of which is the predominant form in all Seasons. Each paroxysm is divided into three stages, Cold, hot and Sweating. The symptoms of which can be had by referring to any book on Practice.

Causes: Marsh effluvia is the most general cause of this disease. We are ignorant of the precise nature of these exhalations they cannot be detected, but this does not disprove their existence. This which is called Marsh effluvia, are not appreciable

to be confined to marshes, but is to be found, in a clayey, argillaceous soil, & also in the most mountaneous regions - Sometimes it produces its effects in twenty four hours, at other times weeks produce lapse & even it is said that 6 or 8 Months may lapse, after the person has been exposed to this cause, before the disease will make its appearance. Heat, as in drought - when all exhalation ceases, this fever prevails. Exposure to cold especially when combined with moisture often produces this disease, acting however, more as an exciting cause - Accumulation of bile in the Stomach is generally considered a cause but Dr Chapman thinks it is rather the effect of this disease, but there then is a predisposition it may be a cause. Intermittent Fever, Sometimes, exists. Epidemically spreading far & wide, the cause, of which being buried in obscurity - It Sometime assumes a mixed character, & in that State is very intractable, the Symptoms of which have arisen from Swallowing a nutmeg - button, pins & needles - from the irritation of worms & certain ingesta &c - Suppressed Catamenia - dysentery - ulcers - pellucid eruptions, state of Pregnancy, Strictures of urethra, introduction of bougies - and Sometimes from the simple irritation of Gonorrhea.

Diagnosis. The disease with which this is most apt to be confounded is Hectic Fever, but may be distinguished from Hectic as the paroxysms of Hectic are seldom regular sometimes occuring at day & then at night — for instance they will appear for the first time at 12 Oclock in the day & then the next time they return will be at night — Hectic generally has two paroxysms in twenty four hours, is not preceded by a chill, without rigors, not relieved by perspiration; in hot stage a circumscribed blush on the cheeks. no head ache, tongue is clean, flushed & florid, bowels in natural state — mind cheerful & full of hope but in Intermittent things are in quite a different state —

Prognosis: When the paroxysms are of short duration; the intermission free from local affection & chills distinct denote the energies of the system to be vigorous; and the paroxysms coming on later & later each time shows the disease to be on the decline; Copious deposits of lateritious sediment in the urine in recent cases, (but not to be much depended on in Chronic cases) is a favourable sign. But when Intermittents become complicated with other diseases, there is much danger to be apprehended — the most violent Intermittents are not the most dangerous. In forming our opinion on the termination of this disease, regard must be had to the age & integrity of Constitution; it is always

alarming in feeble individuals & Dr Chapman says that he has seen three cases of this disease in Children within the month which very yielded to two or three grs of Quinine three times a day — The termination of this disease may be in continued, remittent & Typhus Fevers & sometime in Dropsy — Death in the Cold Stage seldom takes place, & when it does, it is from Congestion in some part. It never occurs in the Sweating Stage, except in very severe cases, when it is caused by exhaustion — Post Mortem appearances differ in the hot & cold Stage — Death coming on in the Cold Stage — We have on inspection, venous engorgement of the deep seated organs & right side of the heart — but in the hot Stage we have phrogosis of the brain & Mucous Membrane of the alimentary Canal — accumulations of blood in the heart — liver & Spleen engorged — brain seriously affected — Bowels loaded with offensive stinking fluid which is offensive in the extreme — Great diversity of opinion respecting the Pathology of this disease — Dr Chapman thinks it is of Gastric origin, the other parts being affected through Sympathy — The cause of the regular return of the Paroxysms is inexplicable. Treatment — of the acute form — The practice adopted by the ancients, in the treatment of this disease, was precisely the same as is followed in Continued Fever of the present time

they commenced with bleeding, warm baths- frictions + all the other means that are now resorted to in in debilitating or long continued Fevers, Thousands fell victims to this empirical mode of treatment + it was finally abandoned by the practitioners of the day as entirely, destructive of human life— Dr Chapman divides the treatment of Intermittents into two periods that of the paroxysm— 2d during the intermission— 1st during the cold stage it should be our object to overcome the chill, and bring speedily on the sweating process— in order to accomplish this the patient should be put to bed + be warmly covered— Should have hot applications to his lower extremities— warm beverages such as hot lemonade or toddy should be given— + if there should be great prostration of strength attendant upon this stage, we must then have recurse to more energetic means, Ether— or Camphor is generally employed, but Dr C— prefers Opium + its preparations— Emetics are very useful, when there is much Gastric distress or when the stomach evinces an engorged condition, Their employment is specially indicated, but it must be confessed, that they are generally attended with very disagreeable effects + great circumspection is required in their use— Frictions on the Spine with a brush is attended with good effects— Venesection has lately been recommended by high authori-

ties but says Dr C- "my experience will not allow me to recommend it to you having never had a case that indicated its use, but in those malignant forms, when there are heavy congestions, I think great advantages might be derived from it, its advocates advance some very strong & potent reasons for its use- Another innovation has recently been introduced in the treatment of the cold stage that is, by making cold applications to the surface- which C. speaks favourably of- In the treatment of the hot stage, we must have recourse to Diaphoretics among which Dover's Powder is to be preferred- Tar Antimonial preparations & Spirits Æther as diaphoretics are inadmissible, from the extreme irritability of the stomach- (but when there is much bile in the stomach, they may be then safely used, as emetics- to evacuate the stomach for which purpose warm water- warm Chamomile tea are also very proper) In country practice Infd Eupatorium Balm is much employed- The Spiritus Mindereri- Ether Sulph: Dulc: Laudanum are useful to relieve the irritation of the stomach- the following mixture is of infinite service-

℞ Pulv: acacia & Carb: Potash — of each — ʒj
Ol: menthæ — — — — gtt vi
Tr: Opii — — — — gtt xxx
Aquæ fons — — — — ʒiij

Take ℥ss of this mixture a table spoonful every half hour —

followed by a small portion of Lemonade —
Opium has been much employed & Dr C says it is useful but
must not be employed when there is much plethora —
Frequently we have local determinations & especially to the
head, this must be counteracted by bleeding topical &
general, purging — cold water thrown up the bowels, will
be found very grateful — but when there is any chilliness or
in weak constitutions this is highly dangerous — in the Sweating
Stage there is sometimes much exhaustion from too profuse
perspiration — in this case we must remove the clothes, change
bed &c &c, sometimes we have congestions of the brain
producing Coma, delirium &c, we must then use the
Cornet, but when the vital forces are much exhausted
Topical bleeding must be resorted to — Enemas — blisters
to the neck & extremities — Sciatica — Congestion
of the Lungs, Liver & Spleen demand attention. The patient
seems gradually to decline, profuse perspirations — Copious
discharges, we must then use warm frictions — Cordials — Sinapisms —
Carb: Ammonia — Blisters, when reaction takes place
with a feeble pulse & then cordials, mild Diaphoretics
are demanded — When the perspiration is very profuse
the application of a blister over the Epigastrium will act
like a charm — first put on a Sinapism & on taking away

shall of apply a blister over the Epigastrium — bathe the body with one drachm of alum & pint of brandy ——— Treatment during the intermission, the object now is, by direct impression is to destroy the diseased before the administration of tonics & Stimulants, always evacuate the alimentary canal by emetics or purgatives, on the first & 2d plans great reliance — & in some instances, think them indispensable, they operate by equalizing the circulation & producing perspiration, & destroying the various morbid operations which may have been formed — They are to be employed with great circumspection, & it is only in the early stages of the disease, in which they are at all admissable, Tartarized Antimony is to be prefered to any of this class of medicines. The lip of blood is very beneficial in some cases at this stage of the disease — After the action of the system has been properly aroused, then we may resort to the Tonics — The Peruvian bark is the favourite tonic or it is given in the form of Sulphate of Quinine — in the dose of 2 grain three times a day — Efficacious as the bark generally is, however it sometimes fails — then we must have recourse to other articles — as arsenious acid — which is considered a very good article in this disease —

Dr Physick places more confidence in Sulphate of Copper than any other, preferring it to the bark or Quinine — It is given in doses of 1/4 of a grain four times a day — all the various astringents & tonics have been found useful — Amonia Cupri — acetas Plumbi — Nitras Argenti — Oxyde of Iron — Sulphur — Blk Pepper — Gentian — Sarsaparilla — Angustura — Columba — Carbo Ligni — Prussiate of Iron — Web of the Spider — Ol. Terebinthinæ — Serpentaria — Eupatorium — hoarhound — Cherry tree bark — Typhoid State is treated upon the same principles, but in Extreme care treatment is more efficient & invigorating — We must use Cinchona bark or Sulph. Quinine in conjunction with blk pepper — during the Enteromission to a large extent — Wine — Wine Whey — The excitement must be kept up during the whole of the Intermission — Ol. Terebinthinæ is an excellent remedy — this disease often degenerates into the Chronic state merely on account of disordered viscera or through force of habit, without any lesion whatever — if there should be, as generally is, any acute inflammation, we must bleed generally & topically — low diet &c — if there be affection of any of the viscera Mercury must be cautiously used. Blisters to the epithemotics put an end to this disease Tartar Emetic in Solution, rubbed over Epigastrium

In case of long standing the following is the best mode of proceeding – Excites vomiting by tartar Emetic & three mornings in succession whether there be any bile ejected or not – The Object is to break all morbid association – Keep the patient during the whole of the intermission under the mildest influence of opium & just before the expected paroxysm, give him a full dose of the opium so as to place him completely under its influence – This practice will not answer in Chronic cases, or when there is visceral obstruction or Gastric irritation – Cold bath – On a premonition of an attack the patient should go to bed & take an opiate. The following mixture will be found useful.

℞

Carb: Ammonice – – – – – – gr V

Pulv: Camphor: – – – – – gr X

Tr: Opii Camphorata – – – ℥j

Æther – – – – – – – ℥i

Aqua dest – – – – – – – ℥viii

At the moment of the attack take the following –

℞ Sulphas: Quinine – – – – gr VIII

Spts Æther: Nitr: – – – – ℥ss

Tr Opii – – – – – – gtt XXV

Aqua – – – – – – – ℥i

Continued Fever

This fever runs its course without any intermission - having however a slight remission & exacerbation - D C says that there is no such a fever as Continued fever. The form in which this disease is most frequently is Autumnal Bilious Fever, arising principally from intense Heat after heavy rains & it may assume a typhoid type. The Symptoms are those usually attendant on fever - heat of surface - quickness of pulse - alternate sense of heat & cold - pain in head - followed by chills &c - the attack may be sudden, having no cold stage - severe headache - praecordial tightness, yellow tongue - much thirst - perverted, bitter taste - burning pain in Stomach - tenderness of the Epigastrium - torpid bowells - Sallow Skin - Circulation Strong & tense & very voluminous; towards morning abatement of the Symptoms takes place, yet it is however very transient, the intermission being sometimes scarcely perceptible - no apparent chill - in the progress of the disease, the remission becomes more irregular - & continues beyond 3 or 5 days the pulse becomes feeble - we have nervous & cerebral Symptoms - blunted sensibility tongue dry or moist & brown - Skin yellow cold & damp - profuse perspiration on the Head & neck - scanty turbid urine - Stools dark & watery - altered countenance - jactitation, great restlessness - often degenerates into low typhoid fever - from exhaustion -

Duration of the disease depends on complication & mode of treatment death usually occurs on 7th 14th or 21st day

Cause – Inspiration of dirt or drinks – Sleeping in damp cold places or clothes – exposure to night air & Heat – Symptoms – When symptoms become regular – pulse slow – the stomach quiet – alvine discharges dark like tar – scabby eruptions about the mouth – we may expect a favourable result – on the contrary – when we have typhoid type – cold wrists ~~& legs~~ and warm hands (Dr C considers the last to be the most certain sign of a fatal issue) sense of internal heat – dark encrusted tongue – skin of a deep Petechiae hue – fetid breath – & we may reckon on a fatal termination –

Post Mortem Examination gives us the following appearances of the Intestines &c – Inflammation about the pylorus – highly Vascular – Stomach interspersed with livid patches or Duodenum & Large Intestines especially the Stellæ – Colon very much affected often ulcerated – Liver is enlarged & inflamed, Gall bladder filled with bile – Spleen softened – Pancreas much ulcerated & smaller than natural – Peritoneum softened – The arachnoid coat much affected also Spinal Marrow – Lungs seldom implicated –

Pathology – Commences in Gastric irritation & extends to the Liver & Brain, Capillaries & other organs through the medium of Sympathy – When you find the skin yellow it indicates a want of bile, rather than an exuberance –

Some eminent Physicians have asserted & attempted to maintain the position that this disease cannot be a master in its course, but Dr C says that it is false, & this disease can be as completely brought under, by the influence of our Therapeutic agents, as any disease to which man is subject, for, continues the Dr, "if I did but believe that I could not cure Continued fever, I would at once strike the flag of My profession and cease to cheat the public by fraud and deception".

Treatment of Continued Fever under the form of Bilious Fever—

There is in fever, always a disposition to a Spontaneous Crisis, on certain days; these days are the 3d, 5th, 7th, 11th, 14th, 17th, 20th & 27, 35. 42— Every practitioner of enlarged experience must have seen a tendency to a remission on one of these days although not so uniformly in this Country as in Greece at the time at which Hippocrates wrote the climate was admirably suited to a Spontaneous Crisis. If called to this disease at an early stage, you find the patient laboring under Gastric Irritation, nausea headache &c, you may relieve him, by gently evacuating the Ductus Cibarius & Sponging the Surface with tepid or cold water according to circumstances— cold applications to the head, Diaphoretics; Neutral Mixture is very useful at this stage of the disease. Perfect rest must be enjoined—

But in other case, we have to resort to more efficient remedies, here the Emetic is an invaluable aid & When there is a full, active pulse, hot skin, determination to the Head & &c Bear not depletion, Carry

It almost may in some cases to Syncope - when the constitution is Sound. always reduce the force of the circulation & the febrile movement. must be destroyed — Nothing more deleterious than small & repeated bleedings instead of copious bleeding - by the former you only mitigate the Symptoms, but by the latter you subvert the disease altogether - bleeding is to be prefered in the early Stages — we may resort to local bleeding — cold applications — evacuating the alimentary canal — Emetics are here in some cases invaluable, Tartarized Antim - is to be preferred — reduced patients cases in children. & where there is incapacity of circulation by the operation of an Emetic. all the Symptoms suffer an abatement - roots out congestions - destroys the train of Morbid association - some caution is required in their administration, & only applicable in the first Stage of disease - prior to the inflammation of the Stomach — & then it would be better to forbear the use of Emetics & substitute purging — Combination of Calomel with Jalap - Colocynth, Gamboge, Elaterium, Seamony &c were formerly much employed especially by the late Dr Rush — but never resorted to by Dr C — he usually prefers Calomel to be worked off by Castor Oil — Medicines should be given during the Intermission, if if given during the paroxysm, the patient will throw them up, or should they not be rejected they will lie dormant in the Stomach & not operate, after having evacuated thoroughly —

the alimentary canal; purgatives are not required, the object now is simply to improve the secretions, which is best done by the administration of Calomel in doses of one or two grains every hour or two — till you have given to the amount of 12 or 15 Grains, then give a dose of Castor Oil — by some Calomel is given in large doses, it is not true that Mercury retains its Specific effect only to a greater or lesser degree in large or small doses — exactly as the stools become dark like tar is it to be considered as the harbinger of recovery + to be encouraged — Sponging the body with cold water is attended with very good effects. Often composing the patient to rest + sleep — promoting perspiration, this should not be employed when the system is much exhausted, but only when the skin is hot — the pulse vigorous — + when there is no congestion + no chilliness — enemata of cold water repeated every hour or two, with the same restrictions. Less dangerous remedy — The remedies next in order, are those that excite perspiration, Antimonial preparations have long been recommended Tart: Antim: in small doses of ⅛ or ¼ of a grain in water every 1, 2 or 3 hours. when it produces nausea its effects are the same as those of Ipecacuanha are best — it is often given in the form of the Kitchens powder which is as follows Rx. Nitras Potassæ — — — — — ℥i

Sub-Murr Hyg — — — — grxii

Tart: Antim: — — — — grj

Div in VIII Powders, one of which may be taken every

hours or two— this preparation is peculiarly applicable in Cases when a Mercurial course is demanded— Combinations of Opium & Ipecac are not well adapted to this disease— Sometimes the stomach will not retain any of the above formula— then we must administer— Spts Aeth: dulc: &c &c— the Neutral Mixture will be found very applicable at this time as the stomach will retain that when it will reject most any thing you can administer the following is the formula of the Neutral Mixture— R/

Succin. Limon. recent. vel Acetic acid. ℥ij

Sal. Tartar: q.s. ad Saturandum

Aq: font — — — — — ℥iij

Sacch: alb — — — — — ℥i

— a table Spoonful of this may be given every hour or two— Topid applications to the surface will assist in bringing on diaphoresis— Cold applications are forbidden. Blisters to the extremities, cause an afflux to the surface & thereby relieve the internal organs from congestion— Some use bark & its preparations, but Dr C forbids their use in this form of the disease— as the eruption is so very slight as never to warrant their administration— always imparting to the disease a typhoid tendency with feeble pulse &c— When the tongue is moist, Surface cool & no cerebral

disorder + the disease has the Intermittent Type. the bark or what is preferable Sulph: of Quinine may be employed + in fact it may then be treated as an Intermittent —

By some Mercury is recommended to be used till Salivation is produced — but I & C is opposed to that + says he has seen the worst consequences result from it — he limits the use of Mercury to an evacuation or 2 of the alimentary canal, + its use in small doses in order to improve the Secretions — but he says that in the South, more of it is required + in larger doses. To produce a given effect, a stated dose is required more or less in proportion —

Typhus Fever

Dr Chapman says this is a congestive form of continued Fever This disease has been divided by some into Putrid + Graivor, or nervous, + putrid, but the one is only an aggravated stage of the other, by others into inflammatory and congestive + &c + &c — But the Dr says that he will treat of it as congestive, noticing its various modifications.

Symptoms. This disease is often mild + insidious in its approach it usually commences with, Langour, Loss of Spirits, weakness, Sickness of the Stomach, Furred tongue, frequent, quick + somewhat tense pulse, with flushes of chilliness + heat — these are the Symptoms that usually mark the Mild form — Symptoms of the Graivor are

The same symptoms although much aggravated, heat of surface - violent determination to the head, strong pulsation of the carotids, delirium - tongue white more or less dry - very peculiar countenance expressive of great anxiety & distress - eyes suffused with tears & dull - aspect malignant & very much like an intoxicated young person - pulse quick small, and irritable - respiration laborious attended with deep sighing - breath hot & offensive - bowels constipated - heat of stomach - vomiting of bile or glairy matter - great thirst - exacerbation of symptoms - living aspect pulse collapsed - eyes ~~heavy~~ heavy - comatose - delirium - low muttering - subsultus - catching at objects as first - pulse so quick as scarcely to be counted - tongue encrusted and difficult of protrusion - unequal distribution of the animal temperature - at this time a miliary eruption makes its appearance - nervous tremors - subsultus tendinum - convulsions - bowels give way & discharge feces resembling dark watery matter - urine often suppressed - the pulse now sinks - skin cold & clammy - singultus & - finally Death closes the scene - Duration of this disease varies according to circumstances - it often terminates by convulsion in two or three days - or it may continue three weeks - in jails it generally terminates by the eighth or tenth day - when it is not cured in a few days, you may expect a lingering disease -

When this disease arises from climate - It is sudden & rapid in its course, the system sinks at once - emerges quickly into cold stage - with all the symptoms of muscular debility - alternate flushes of heat and cold - Shrivelled face of a leaden colour like a bronzed statue - Alae of the nose become contracted the forehead polished & shining - eyes red & feeble expressive of despair the head is much affected - like a case of extreme drunkenness - pulse at beginning slow now is feeble ——— ———

Causes —— Most of the European Writers ascribe Typhus to a peculiar Contagion generated in the person having the disease & giving it to another — They exclude effluvia - called Their causes of Fever — It is however generated in crowded & ill ventilated places, It may be communicated by persons wearing the apparel of one diseased with this disease — or by sleeping in a bed in which a person died of Typhus Fever & the sphere of the action of this contagion is exceedingly limited — it is a matter of fact that dirty clothes will receive & retain this contagion to a much greater degree than those that are clean —— the period of incubation of this fever varies much, it is usually about 8 or 10 days although it may be extended even to sixty or seventy days — it appears principally during cold weather —— Heat prevents its extension, while on the other

hand, Cold facilitates its propagation. Dr Chapman says that he has doubts of this being a contagious disease, he believes it arises more from the distempered atmosphere, as a person may acquire the disease by entering the sick room of one labouring under this disease but it is not from contagion but from breathing the infected air of the apartment — on exposure to this cause, we have headache - Muscular relaxation, tremulous motion Vomitings &c which bring on Typhus Fever — It arises from various other causes - Marsh miasmata - and other exhalations — through the agency of continued heat independent of atmospheric impregnation, & in fact it prevails, as an epidemic, among us in autumn, in elevated places free from exhalations of all kinds, extreme cold may produce this disease - low diets consisting of vitiated food may be a cause — Affections of the Mind Grief &c The course of treatment pursued by many practitioners is a prolific source of Typhus Fever — It is not very common in this Country —

Exciting Causes are the same as described under former heads in continued Fever -

The Characteristic features of this disease are — The early cerebral Symptoms - Loss of muscular strength — Gloom & Despondency dulness of comprehension — incoherent articulation —

Skin cold or burning hot — Singular odour of breath —
That Species of Typhus dependant upon foul air, never prevails
in warm weather or in Tropical Climates —
Prognosis — There is no disease in which it is so difficult to
establish a just prognosis, as in Typhus, the mortality however
is always great in crowded places, but where there are no great
cerebral distress — surface temperate & moist, tongue, soft, elastic and
clean — pulse slower & more regular — dark discharge from the
bowells, boils in different parts of the body, or scaly eruptions
around the mouth — we may expect a favourable termination,
but on the contrary when we have a sense of great internal
heat & cold Skin and vice versa — early sweats, when the patient
sweats freely on the 2d or 3d day a bad Symptom — much irritability
of Stomach attended with retching rather than vomiting —
smooth polished tongue — or one perfectly natural, this is
a dreadful symptom — pain in back of Chest & along portion
of Spine, In more advanced Stages we have haemorrhages from
different parts, involuntary evacuation of urine — Profound
Stupor, involuntary flow of tears — Sight of eye & blindness —
convulsive twitchings of the face, Spasms of the wrist, Dr C says
he never saw a patient recover, who had the last named Symptom
distraction of the senses — unmeaning Motions of the hands —

Hoarseness, difficult deglutition vomiting dark matter — unable to protrude the tongue — trembling of the tongue — pothisha face — hanging of the under lip — impeded respiration — Retraction — Skin dewy — perspiration on Head & neck — insensibility to sinapisms — Cadaverous odour — weak pulse — a disposition in the patient to slide down in the bed this is a dreadful Symptom —

Post Mortem Examinations, exhibit the mucous membranes of the stomach — and brain inflamed — blood dark, parts of it intermingled, accumulations of a sero-sanguineous fluid in the cavities — Spinal cord affected — Arachnoid Membrane of the Brain inflamed — in Chronic heavy serous congestions — the Hydrocephalic viscera highly diseased — Pancreas inflamed — follicles of the mucous membranes — Glands all enlarged — when the disease arises from cold, the pulmonary apparatus is much affected —

Pathology — Typhus Fever commences in Gastric irritation affecting first the brain & then all the organs becoming affected Sympathetically — The Brain may be the seat of the irritation, especially when it arises from Contagion —

Treatment – In order to attain success, the practice must be conducted with judgement & caution – In treating Typhus Mitior – which is not kept up by any active Phlogosis, or vitiated secretions – we must be sparing of the use of the Lancet – we resort to Mild Cathartics, topical Bleeding – taking blood from the suffering organ – Sponging surface with cold or warm water according to circumstances, [redacted] or beverages – Diaphoretics, More frequently however we have to contend with the Congestive & Inflamatory type of this disease, mixed as it were, in nearly equal proportions, the treatment in this stage, is nearly the same as in Continued Fever, commencing with an Emetic, this however has been objected to – but its efficacy is unquestionable; by the action of an Emetic, congestion is prevented or if formed, is removed, as it equalizes the circulation & drives the blood from the internal organs, to the surface –

As a general rule, they are only applicable in the forming stage although some recommend them in the latter stage; where there is much gastric irritation, furred tongue, or ejection of bile, no doubt can then exist of the utility of Emetics, but when there is Gastritis, they must not be employed –

Purgatives are now demanded, of which class. Calomel is decidedly to be preferred, and if there be much febrile reaction, venesection is especially required, Some recommend bleeding to be carried to a great extent, but Dr C. says that it is not to be carried farther than is necessary to make a decided impression on the System; when the patient is able to bear the loss of blood —

Cups & Leeches to the Head & Epigastrium — followed by Cold applications. —

At this period of the disease, we are sometimes troubled with pain in the neck & back along the course of the Spine which must be removed by the immediate application of Cups or Leeches. The pain sometimes attacks one part of the body & sometime another but no matter where it may be seated the part must be defended —

When there is great Phlogosis, we must never omit the evacuation of the bowels, this is best done by Calomel followed by Castor Oil — but all purgatives must be suspended on the appearance of watery discharges - evincing increased irritation —

Cold applications to the whole body, especially Sponging the body with cold water will be found very useful

Cold Enemata are also beneficial - but the two last are to be used with great circumspection, & never to be resorted to in feeble patients -

If the above enumerated remedies fail, we may then again appeal to the Lancet -

Diaphoretics are very important - but they have of late been much neglected, as well as the cause of this was, that the system was not properly reduced before they were used - the best of this class are - the Neutral Mixture - Citrate of Ammonia - Spts. Nitr. Dulc liberally exhibited - & given alone or in combination especially with Opium when it is admissable - Antimonials are to be resorted to, but when the pulmonary apparatus is concerned the preparations of Ipecacuanha are far preferable -

Should the vital powers be much weakened, they must be recruited - the apparent debility which sometimes takes place arises more from Congestion, than any thing else, the powers of the system lie dormant, stunned as if by a blow, in such cases the indication is to evacuate the overburdened organ, by inviting the blood back to the surface - here extensive bloodletting is mischievous, the general circulation is languid, the blood here is confined in the internal organs, and but little is in the general

circulation, small bleedings sometimes succeed in unloading the congested organs, but in other instances, they fail & every drop of blood drawn, is so much lost to the system already too much exhausted — in bleeding a patient already exhausted from bloodletting, the pulse is not much to be depended on the action of the heart is the best criterion, & even this can not always be relied on, as in proportion to the obstruction so is the efforts of the heart — a person laboring under congestion is in the same condition, as respecting the general circulation, as one exhausted by repeated bleedings —

Emetics, by ~~exposing the~~ equalizing the circulation are much to be depended on —

Calomel in small doses, is a valuable medicine in Typhus —

Place the patient in a Vapour Bath & apply stimulating frictions — Dry heat to be applied by bags of hot sand, oats & c, —

Sinapisms — but when the delay is admissable, a blister should be applied over the Epigastrium or to the nape of the neck —

Active Diaphoretics & warm beverages — The stimulating practice in this disease so much recommended by some eminent practitioners is replete with danger, & should not be resorted to — The fluctuations of this disease must be steadily watched & prescribed for —

2d Stage, Exhaustion is the characteristic symptom of the disease at this stage of the disease, Dr C says he believes it is the result of improper treatment, it is often induced by the too early resort to Stimulants. An active remedy misapplied is one of the most powerful agents. if ill timed we have pain in the head, stricture of the breast, jactitation, hot, dry skin — quick & rapid pulse — vitiated secretions, in fact stimulants in order to be useful must produce secretions from skin, lungs &c & in no case to be resorted to when the tissues or any of them are inflamed & especially when the inflammation is seated in Stomach & Brain. But in cases where they are admissable, we should prefer Carbonate of Ammonia to any other, as it operates on the capillaries &c & produces an action more like the natural action of the body than any other article of the Materia medica. it should be given in small & repeated doses of 10 grs. but we must graduate the quantity to the Stage of the fever, in order to promote its operation, were as they may be given — but the susceptability of the patient to the operation of the Carb: Ammon: soon wears out & then we must select some other article of the same class as Camphor, which at one time enjoyed a high reputation — Combination of Camphor. Opium & Ipecac.

Application of vapour—

When the skin is cold & dry—especially sweating and being continued Sponging the body with tepid vinegar will be of great service Blisters may be also employed, but they are condemned by some—they should be applied to the extremities, but by some Sinapisms are preferred—

To sustain the strength of the patient the Peruvian Bark was once employed—Should there be a tendency in the fever to vomit it may be employed although Dr C says his experience with it is very limited, he greatly prefers in this fever Sulphate of Quinine—

But now a new covation takes place & Stimulants are required & opium is placed by some at the head of that class it should be given in small & repeated doses at short intervals. It may be given by the stomach or endermically or by enemata—

Camphor is very good—Musk R. Castor, & Asafoetida are not as effectual as opiates. The Musk when good is an exception to this remark, but is seldom to be obtained good from the Shops.

Wine, the best kinds are Madeira & Claret, to be taken in small quantities & gradually increase the dose the limits to which it may be allowed are 2 pints a day.

Effervescent draught. Porter. Ale – are appropriate in most of the low stages of fever –

Cider. Mineral acids are recommended by Fordice – Dr C however does not place much confidence in the Mineral acids.

Infusion of Columbo + by some, Mercury is largely given internally + endermically – This practice says Dr C, is not good – but he uses Mercury in small doses in conjunction with opium at this stage of the disease to a considerable extent –

Spts. Turpentine is prescribed in all low diseases in this City (Philadelphia)

Phosphorus has been much prescribed by the French Physicians but Dr C does not employ it often (he refers the class to his Therapeutics, vol 2d, page 92.) + even then with extreme caution.

The sympathies becoming interrupted, the local excitement is not extended, give them fair vent to Rubefacients + Frictions with Pepper – Brandy – Spts Turpentine – Phosphorus diffused in aether – Dry heat now is very good. It may be applied by bags filled with hot sand, oats or salt –

It sometimes happen that owing to some obstruction the patient cannot swallow them, the Medicines + food

must be given through the oesophagus or rectum — the latter is to be preferred — articles given in this way have their full effects.

Dr C to day summed up the different indications to be met in treating this fever & the appropriate remedies for each indications, say. Fever though commencing at a point, yet through sympathy other organs and became affected —

Thus when the head becomes affected by a determination of blood to the part, with delirium, stupor & pain — we must apply cold as ice water & to the head — or cold vinegar is very good —

These failing the hair must be shaved off & then apply cold to the head — even the shaving off the hair is attended with great relief to the patient —

By Smith it is recommended to pour the water on the head in a stream as from a tea pot & tea kettle & but Dr C does not approve of it, he says he has seen it procure great agitation & — but cold must not be applied when there is congestion of the brain —

Topical bleeding by leeches, cups or opening the temporal artery — Venesection, purging — warm applications to the extremities, stimulating liniments & a blister to the nape

2d. The patient is sometimes troubled with ~~vigilance~~ want of Sleep &c with increased Temperature of the body, we must take blood — Sponge the Surface with cold water — administer cold enemata — immerse the arms in cold water, Dr C says he has seen the patient fall into a profound Sleep after immersing the arms into Cold water — no advantage is derived from the administration of Opium — but Acetate or Sulph: Morphia — Hoffman's Anodyne Liquor — & towards the close opiate may be employed, best as Enemata —

3d Great Gastric disturbance, nausea — vomiting — arising from indigestible substances taken into the Stomach — accumulations of bile, irritability — to relieve this condition we must use emetics, Cyder, water —

To relieve the irritable State of the stomach unattended by Phlogosis, we may use the Effervescent draught — a tea spoonful of lime water & equal part of Milk — or two ~~tea~~ tea Spoonfuls of the latter may be advantageously employed. — toast water — small doses of Magnesia — small doses of Calomel alone or with small portions of opium — Mint tea — Strong & Clear coffee without Sugar or milk — very small dose of Acetas Plumbi — Vinegar — butter coca infusions of Piapica, Serpentaria &c &c Jr Cloves — Infusion of Capsicum — hot fomentations to the Epigastrium — Potash Mixture — see prescriptions no. 31 —

Clove bags made by taking 2 ℥ of Cloves & stitching them up in a bag & ringing them out in any ardent spirits- applied to the Epigastrium — Mustard pediluvium — Blister to the Epigastrium — Old opium pill — To open by enema, or opium as a suppository — but should there be gastritis - then we must use Topical bleeding & to be repeated as circumstances may require — venesection followed by warm or cold applications to the Epigastrium —

4th Singultus may arise from apparent causes - when there is convulsive motion of the diaphragm, it is owing to irritation of the Phrenic Nerve, then we may apply cups leeches or blisters to the nape of the neck & thereby relieve the patient.

It may be a gastric affection — then lime water & Milk — vinegar Do allay greatly as vinegar in Singultus — Antispasmodics — Stimulants may be employed as brandy - Tr Capsicum &c —

Drinks. Lemonade or Orangeade — Apple water — toast water — Gum water, water itself in limited quantities - In violent Gastritis, there is sometimes great ~~thirst~~

thirst then water administered in large quantities Do

has known to be productive of beneficial results—
Cleanse the tongue lips &c with vinegar, Ale & Porter may
be allowed in small quantities— Washing the Mouth
with a mixture of Charcoal & water— holding a piece
of ice in the Mouth— if from depraved secretions
small dose of Calomel worked off by oil may be given—
Thin drinks will be sufficient for nutrition during
the Continuance of Fever— Water with Liquorice root in
it— or let the patient chew liquorice root will relieve
Thirst—

Sometimes there is great clamor for Meats. Must not
be gratified— Light to be excluded from the sick
room, which must be kept quiet & well ventila-
-ted— & perfectly clean— When there is a disagreeable
odour in the room let the floor be sprinkled with
vinegar, D°C is opposed to all fumigations in a sick
room— As to diet for the Convalescent— he must always
begin with the farinaceous articles as rice Sago &c &c
& then Chicken & Partridge Oyster & Beefsteak &c—

Variola

This is a disease of Modern times, it cannot be met with in the writings of antiquity, all attempts to prove it of ancient date are unsatisfactory.

The first notice of this disease, was taken by the Arabians in 572, others say it appeared first in China, Hindostan, but Dr C says it must be regarded as a disease originating in Africa & from thence it has diffused itself throughout the world, with exception of New South Wales, where it, as yet never has appeared.

The Epithet of Small was given to this disease to distinguish it from Syphilis, which is frequently called the Large Pox.

It is divided by most writers into two kinds, distinct & confluent — distinct, when the pustules are separate from each other & surrounded by a circumscribed ramp. 2d confluent, when they appear to run into each other — Dr C does not approve of this division, because the disease may be, distinct in one part of the body & confluent in another part in the same person & at the same time — he prefers dividing it into inflammatory & ty~~phoid~~ adynamic form

Symptoms. for Symptoms of the inflammatory form see, some work of the Practice of Medicine —

The eruption appears on the 4th day of the disease.

Symptoms of the Zymotic stage, a gradual disclosure of cerebral disorder takes place, the state of the Epigastrium is not uniform sometimes the sensibility is destroyed & at other times it is increased the patient is in a state of collapse, skin cold, Countenance pale the eruption appears earlier than in the inflammatory form, but sometimes it is retarded — little or no remission of Fever during the eruption, sometimes, it is aggravated — the Pulmonary organs suffer greatly, the matter forms in brown crusts which fall off in 12 or 14 days, &c —

Causes, Variola arises from a specific contagion, no one at present, doubts in the least this position — but Dr C says it cannot be communicated by Fomites —

The sphere of the influence of the contagion in the open air is limited to 10 or 12 feet —

The attack usually comes on in about 14 days after exposure to the contagion it is not influenced by any circumstances whatever —

Some people appear to be totally insusceptible to this disease, let them be exposed to the cause ever so long & they will not be affected — it is thought that one out of every fifty persons, is thus situated —

Diagnosis. Variola may be confounded with Chicken Pox, but it may be distinguished from it as the latter is preceded by little or no fever, & the pustules arrive at maturity much earlier than small pox, are vesicular, & appear in successive crops. In some instances it is very difficult to distinguish it from varioloid - the latter is however marked by greater mildness - earlier appearance of the eruption & the pustules are filled with a clear fluid instead of pus, & leaving behind no indentation but merely a red speck &c

Prognosis - The Zymotic condition is always less exempt from danger than the inflammatory - The disease in persons of advanced age & pregnant & especially parturient state is apt to terminate unfavorably - from 2 to 11 is the most favorable period - the age of puberty in females is said to be unfavorable for having variola -

It ends favorably when the disease keeps regularly through the several stages - but when the eruption appears prematurely or the reverse - or when there is an entire cessation of fever - or during the eruption, a sudden subsidence of the swelling of the hands, or the copious flow of Saliva suddenly stopped are very bad signs, when the Pulmonary organs become involved, except Laryngitis, is a bad sign - it is calculated that one out of six die of those attacked with

this disease.

Post Mortem appearances, the Mucous Membranes exhibit signs of Phlogosis, also in the lungs & brain —

In the Typoid condition, we have congestions in the veins, effusions into the Large Cavities, ulceration of the internal coat, pustules in the Peritoneum, & false membranes lining the whole canal &c

Pathology — Variola has its origin in the Stomach & radiates to other parts — it is translated from the Mucous Membrane to the Skin — When the translation fully takes place, it is a favourable sign, but when it does not, it is very unfavourable — Some say that the blood in this disease is infected, but, as Rs Dr C, what evidence have we that the blood is infected? Can the disease be produced from it? No.

Treatment — Variola, like all the diseases of this class is incurable — all, the Physician can do is to palliate the sufferings of the patient until Nature, who always acts for the best here, by certain Operations effects a cure — this disease will run its course in spite of all our efforts to the contrary —

When mild it were better to let it alone, but

regulate the diet & temperature of the patient — In the first Stage of the disease & irritated State of the Stomach, we may exhibit an Emetic, when timely exhibited it has a happy effect producing determinations to the external surface —

Saline Laxatives are to be used to evacuate the alimentary Canal —

Calomel was here once preferred on account of its supposed Specific agency —

Violent purgatives Must be avoided —

Here we may use, very advantageously Mild Diaphoretics, such as Spts. Nitr. Dulc — Neutral Mixture (See page 17.) &c.

These may remain probably answer the purpose, but if the arterial action &c. is high & there is a determination of blood to the head &c. venesection cannot be dispensed with —

Topical bleeding may be resorted to, if there appears to be Tenderness of the Epigastrium &c. —

When the cutaneous Surface is hot, we may make use of cold applications, the best of which is Sponging the Surface with Cold Water —

Convulsions sometimes happen in Children, but they are not

alarming, to subdue which, we must resort to cold applications to the head & immersion of the lower extremities in warm baths = Sinapisms may also be used — — —

The patient should be kept in a cool & well ventilated room, to be placed on a mattrass in preference to a bed when one can be procured — & to be very lightly covered with bed-clothes ~~& case~~ in warm weather, we may expose him to the open air, when he is very hot & has much fever.

In the Typhoid Form of this disease, we have weak inflammatory action mixed up with Congestion —

Evacuations here must not be carried to any great extent — it is of importance however that the patient should lose blood, topical bleeding will frequently answer our purpose, without the aid of venesection —

In this form of Pneumonia we frequently have cases, where it is necessary to support the "vis vitae" then use Carbonas Ammonicæ, vina balth &c —

Emetics are useful in restoring the eruption, when it may have disappeared from the surface, we may also use, Sinapisms, or blisters to the extremities or what is still better apply them to the Epigastrium.

When there is a prostration we may resort to Wine which

is the very best remedy at this stage of the disease -

Spts. Turpentine has also been recommended -

When there is much nervous irritation we may use Combinations of Opium & Camphor - Hoffmans Anodyne liquor - Cold Cataplasm of Flax seed -

To prevent the patient from being marked from this disease, some recommend, covering the face with linen spread with fine cerate - camphorated ointment. others puncture the pustules with a lancet & touch them with Caustic - but Dr C says, his practice is to subdue the inflammation by cold applications & on the 1st or 2d day after their appearance. then open the pustules & wash them with Milk & water - it is also necessary that light be excluded -

Disease of the eye may be relieved by wearing a bag of camphor before them -

Detergent gargles become necessary sometimes in this disease -

—Innoculated Small Pox—

Innoculation has long been known to divest the small pox of its dangers More or Less.

The late Professor Kuhn, never lost a patient whom he had innoculated for small pox & Dr Rush & Dr C say the same— that they never lost a patient after he had been innoculated. Innoculated small pox, cannot be communicated through the Atmosphere, the only way by which it can be communicated is by innoculation—

The best seasons for innoculating is Spring & Autumn— but we must be particular not to innoculate Children under Six months old & of bad constitutions— it is much Milder in early Then in old age—

In former times, then were great preparations of the System made as bleading— diet, purging— Mercurial or Antimonial course of Medicines &c this was called preparing the System— Dr C, says, that he doubts, whether any advantage was derived from it—

In innoculating it is of no importance, from what kind of small pox whether distinct or confluent you obtain the Matter, as the distinct will often produce the confluent and "vice versa"—

The attack usually comes on in 9 days after inoculation — very often we have little or no fever, but at other times we have it very severe —

Treatment — When mild little is required, but should it be necessary to interfere, proceed on the same principles as have been given in treatment of the natural small pox —

Varicella —

This disease depends on a specific contagion different from that of Variola —

Symptoms — It is seldom attended by much fever, it continues about 3 days & terminates in the appearance of a vesicular eruption, which usually comes out first on the breast & neck — next on face & scalp & then extremities — A troublesome itching in the skin generally attends this disease.

The eruption appears in successive crops, so that some will be just appearing — others be in full maturing & others in the decline —

The vesicles in different cases assume different forms, this has given rise to the division of this disease into 3 varieties, viz — lenticular — conoidal & swine pox —

This disease may be communicated by inoculation—

Treatment— There is seldom ever any treatment required for Varicella, but when it is necessary—it is the same as recommended for Variola—

—Vaccina—

Vaccination was first practised by Dr Jenner, great exertions have been made to rob him of his well earned Laurels, but hitherto they have been unsuccessful—

As to the source from whence the vaccine matter is derived + Symptoms see some Boston Practice—

Dr C says that we should never vaccinate a child within in the month, if it can be possibly avoided—

Nor vaccinate when there is any affection of the skin— as it will in such cases be apt to fail or produce a spurious disease incapable of protecting the System from Variola—

Some prefer to operate with the virus taken from the vesicle, but Dr C says that he always uses the scab—but he says, he is not satisfied that they have acted right in preferring the scab, as in drying it must lose power

rather than acquire any—

In vaccinating with the scab, we should prefer that of a dark mahogany colour—hard & compact—& having a well defined Margin—the coat external part to be scraped off—& the hard internal part to be used—

We must endeavour not to draw blood while introducing the matter, as it dilutes too much the matter or what is more probable washes it off—the best way of applying the matter is to place it on the skin & work it in with the point of the lancet—or merely raise up a small portion of the cuticle with the point of the lancet & introduce the matter under it—

The incision will heal up in a short time, but if there be much inflammation afterward the operation will not succeed.

Diagnosis. The genuine may be distinguished from the spurious by attending to the following circumstances,

In the genuine little or no inflammation arises until about the fourth day.

In the spurious considerable inflammation & elevation of the skin at the punctures appears much earlier—resembles a small boil—

The genuine increases till the 6th day

The Spurious pustule arrives at Maturity & finishes its course at a much earlier time -

Genuine changes into a pustule about the 6th or 7th day - Spurious, before this time, suppurates & is converted into a sore - Genuine pustule, is perfectly circumscribed, elevated, flattened surface, with a central depression when at Maturity & contains a colorless transparent fluice -

The Spurious pock is more elevated, not depressed in the centre, is irregular or angulated in its circumference & contains opaque purulent Matter -

In genuine vaccination a beautiful circular & circumscribed areola almost always surrounds the pustule, In the Spurious, an irregular superficial inflammation occurs on the 1st or 2d day after the appearance of the pustule - & the pustule itself appears more like a common festering sore from a thorn than, one arising from vaccine virus —

Treatment, Vaccina seldom requires any treatment - but when febrile symptoms attend, we should order a reduction of diet, some mild aperient Medicine, cooling drinks, & small dose of Pulv: Ipecac: Comp: Pulv: or antimonial Wine, we some times have to make use of local

applications, when the pustule has caused much inflammation then we may use cold water — Solution of acetate of lead — or poultices made of lead water &c &c —

It was said by Jenner that a slight sore situated behind the ears for example would prevent the efficacy of vaccination, but Dr C does not believe it —

Sometimes it happens that after a person has been vaccinated & Rubeola, Scarlatina & breaks out before the vaccine disease has come to Maturity, that the vaccine disease is suspended until the termination of the Rubeola &c & then it will go through its regular course —

The cause of failure in vaccinating may be attributed to various causes — 1st the operation may be performed negligently 2d the matter may be too old — it is weakened by Supuration — tion but not entirely destroyed — It may be kept longer in cold than in hot weather —

3d The matter may have been taken from the vesicle too early —

4 It may become inert in a vesicle originally good from having been scratched, rubbed &c &c —

5 Sometimes you give a mere local disease, the system not being at all affected, this is a fruitful source of

failure, this affords no protection to the system against variola — The scar of a genuine pock is small, distinct circular, having cells & striata ——

— Variotoid —

Rubeola

Chapman divides this into Inflammatory and Typhoid
Symptoms &c see the Works on Practice (Dr Dewees')
Diagnosis see Scarlatina—

Treatment— In the milder forms of this disease Medical treatment is scarcely ever required, we should direct the patient to avoid exposure to cold & use an abstemious diet—

But frequently we have to resort to Emetics in the early periods of the disease, when there is no indication of Gastritis, which relieves the pulmonary oppression, and prepares the skin for the eruption— After which we must evacuate the Alimentary canal by the use of mild Saline laxatives—

Diluents drinks are very useful—

Diaphoretics, warm baths for the purpose of exciting the action of the skin &c

If the pulse is full & corded, or there be much fever we must resort to venesection— Dr C places great confidence in this remedy & says he never knew a patient to die of Inflammatory Measles where venesection had been promptly resorted to— Blisters, Cups & Leeches are of great use in some cases.

In the Typhoid form, we must reject the Lancet or use it with great caution-

Emetics are to be given, to relieve congestion &

Stimulating evacuations of the Alimentary Canal

Calomel is a favourite remedy-

Stimulating Diaphoretics, become very useful-

Vbasom Bath — ʒj - Cups & Leeches.

But should symptoms of exhaustion appear we must then make use of More Stimulating remedies as Carbonas Ammonicæ in doses of 5 or 10 grains. to be frequently repeated as once every half hour-

Vbine Whey - ℥ j.

The Temperature of the Chamber should be pleasant about 60 to 65° ~~of~~ the proper degree- Whereas in Variola. a low degree of temperature is necessary-

- Scarlatina -

— Haemoptysis —

This term is applied to Hamorrhages from the respiratory passages &c

It usually attacks persons from 15 to 30 years of age

For causes, Symptoms &c See Eberle —

Pathology, The mucous Membrane is almost invariably the seat of the disease, but sometimes the cellular substance of the lung is involved, but of this last Dr C says he never has seen but four cases.

Treatment. Unless the Haemorrhage is excessive or the patient much debilitated, it will generally prove salutary, but should it be necessary to interfere, we must resort to venesection, we should take blood largely, so as to make an ~~decided~~ impression of the system, Dr C disapproves of small & repeated bleedings & prefers bleeding largely at once —

The Haemorrhage depends not so much upon the redundancy of blood as upon the unequal distribution of it.

Emetics are of great importance in the treatment of this affection, the practice was instituted by Dr Robinson of Dabling, as they reduce vascular action, restore the just distribution of the blood, remove dyspnœa, abate cough As much as any process whatever, vomiting has the effect of removing congestion + rectifying the morbid state of the capillaries, on which hæmorrhage usually depends. Purgatives are not urged farther than merely to keep the bowels in a laxative state, this however is very necessary.

Blisters are unquestionably serviceable in this hæmorrhage after arterial action is reduced.

Saccharum Saturni has been found useful, but its use should always be preceded by venesection + when fulness + activity of the pulse exist.

Nitras Potassæ by weakening vascular action, proves of service in active hæmorrhage.

Digitalis Purpurea. Rest. Low diet. etc, etc, + etc.

Hæmatemesis

The symptoms resemble very much those of Dyspepsia — but are attended by a discharge of blood — Causes. This may be brought on by a variety of causes. as hard ingesta, cold — Chronic Dyspepsia metastasis &c &c

Diagnosis. This sometimes resembles Hæmoptysis, but it may be easily distinguished from it as Hæmatemesis is not attended with by any pulmonary affection & the blood always of a dark colour & often coagulated & is vomited up —

Prognosis. When the discharge is in large quantities is dangerous especially when connected with any organic lesion & then it is generally fatal

On dissection you find the mucous membrane of a dark brown colour, with clots of grumous ~~blood~~ blood on its surface, sometimes the infiltration is so complete as not to change the surface, sometimes again it appears to have occured from effusion, sometimes a species of ecchymosis is met with — Ulcers are sometimes found in the stomach Dr C narrated a case in which there was an ulcer large enough to admit his two fists to lay them in it — sometimes the stomach is found adhering

to the liver – also engorgement of the liver & spleen & lesions to a great extent –

When the haemorrhage is of the inactive or passive kind occurring spontaneously, the blood comes from the vitiated cellular substance of the Spleen &c &c when the Spleen is the source from which it arises. It is carried to the stomach by the vasa brevia –

When the haemorrhage comes from the mucous membrane of the alimentary canal the irritation is frequently transfered to the peritoneum & then we have dropsical effusions, the same holds good with respect to the liver & Spleen.

It is asserted by some that all haemorrhages from the alimentary canal are venous, but this Dr C positively denies –

Treatment – Being called to a Gastric bleeding we must resort to venesection & carry it to that extent which the case may require.

A sinapism or blister over the Epigastrium in order as much as possible to derive the blood from the vessels of the Stomach –

Rest & low diet are indispensable in the treatment of this affection –

Cola applications over the region of the Stomach—
Astringents— various articles of this class have been
from time to time recommended, but Dr C says they
are all useless except Opts Turpentine and hence it
is, that it seems to operate almost as a Specific
but not to be used when there is active inflam-
mation—

Emetics in the absence of inflammation are
exceedingly useful— owing to their great influence
over the capillaries, and removing large quantities
of blood, by which the Stomach is oppressed—
we must not be deterred from giving Emetics by the
appearances of debility which arises not from the loss
of blood which the patient has sustained so much as
from the depraved condition of the Stomach from the
presence of the blood in its cavity, the removal of which
by an emetic is the proper course, which will be
followed by a rise of the pulse & increased warmth
of the Skin—

Ipecacuanha is the emetic to be preferred—
The flow of blood being checked by the above Means
Mild purges become useful and cannot possibly

be dispensed with —

In heavy congestions we may resort to venesection — and Blisters over the congested part —

Spts Turpentine here is very useful — it is in fact one of the most efficient of our remedies in the case of from 20 to 60 drops — repeated according to the emergency of the case.

Purging is not to be neglected, feeble circulation & vomiting is often relieved by an evacuation ~~with~~ of a table spoonful of Castor oil & teaspoonful of Spts Turpentine Should there be a lesion of the liver or spleen, it must be relieved before we will be able to effect a cure, the Manner of doing which will be given under its proper heads —

Should it arise from the suppression of other flows as Catamenia, Hæmorrhoids they must be restored, the first by Emmenagogues &c the second by the use of aloes & leeches around the anus &c

Hæmatemesis is very apt to occur on the sudden suppression of the Menses — In this disease purgatives have been too sparingly used — during the flow of blood allow cold drinks & air &c in sporadic cases, where there are Symptoms of exhaustion — we must resort to Stimulants as Wine & sometimes Brandy & Aqua Ammonia

— Hæmorrhagia Uterina —

This may occur in an impregnated or unimpregnated uterus, the last of which will be considered here, the first belonging more particularly to the department of Midwifery —

This Hæmorrhage is generally ushered in by Chilliness Fever — head ache — respiration becomes affected, pain in the loins — desire to urinate — sometimes tenesmus then the discharge of blood from the Uterus, which does not relieve the patient in the least unless it is very profuse, which being the case we then have exhaustion, cold extremities — vomiting &c &c — It generally occurs about Puberty just before the appearence of the Menses & often it is flowing at the same time with the Menses, the cause of which Dr C thinks is, that the vessels of one part of the uterus are in a healthy condition & secrete their peculiar fluid the Menses, while the vessels of the other part being in a diseased state allows the blood to escape unchanged —

It generally appears also about the decline of the Catamenia — This is also divided into active and

passive kinds— The first is generally found in the robust & those of the sanguineous temperament— the passive in those of an opposite condition of system. This Hemorrhage governed by the laws of periodicity—

Causes. Sedentary habits— Dancing— Constipation— Cpuitation drastic purgatives, too long indulgence in warm Bath & immoderate indulgence in venery or abstaining entirely from it &c

Diagnosis. The only disease with which this can be confounded is Menorhagia*, but may be distinguished by recollecting that that the fluid in Menorhagia never coagulates but in this affection it is pure blood & coagulates— The peculiar smell, Colour & appearance of the fluid in Menorhagia* will also assist us in the Diagnosis—

Prognosis. In the active form very little danger is to be apprehended— but the passive form is more dangerous on account of its constitutional effects—

Pathology is the same as other Hemorrhages—

Treatment— In the active form Dr C says he sees no objection to permitting the blood to continue flowing, as it is an effort of nature to relieve the parts— but when from any cause, we deem it necessary to interfere, we may resort to the following remedies.

* It will be recollected that Dr C considers Menorrhagia an

Venesection is our greatest remedy in this as well as in the other varieties of Hæmorrhages—
To be accompanied with Topical bleeding by leeches or Cups over the uterus—
The bowels are to be kept in a soluble condition by Laxatives—
After which Nitras Potassæ alone or in union with Antimony - is a valuable remedy—
Astringents have been used with great advantage but they should always be preceded by the evacuants— Sugar of Lead is the best of this class in this affection, & it has been affirmed by some, that if any remedy is a specific in a disease it is Sugar of Lead in this Species of Hæmorrhage - but Dr C says he cannot say the same, but considers it very useful when an astringent is demanded. Ipecac: is a very valuable Medicine in this affection to be given in such doses as scarcely to affect the Stomach— but Dr C says he knows not what would be the effects of it if given in such doses as to induce vomiting in the active form, but sees no reason why it would not be beneficial in this as in every form of the Catamenia—

well as in other forms of Hæmorhagy ~~after~~
After the proper evacuating we may make use of Digitalis when the pulse is irritable & quick, provided the Hæmorhagy is not of the active kind, as it would in such a case be apt to produce relaxation of the vessels & thereby increase the flow of blood—
Ergot has been highly recommended by some in this disease, but Dr C says he has had very little experience with it, but considers it of no value in this form of Uterine Hæmorhage—it is, says he—useful in that form of the disease which follows Delivery, but there is no sort of analogy between the two cases as in the cases which follow delivery—vessels are torn & we wish to procure contraction of the uterus, so as to consolidate the mouths of the bleeding vessels. but in the other kind there are no ruptured vessels, & our object is to effect a change in the capillary vessels—
Tr Lee's Cornus is considered better than the powdered article the dose of which is XXX to XL gtts—to be repeated as the case may require—
Opium in the early stage is injurious, but where there is much pain, we may administer it after the

proper evacuations with decided benefit—
Dover's Powders are also useful when prescribed under
similar circumstances—
Local Applications. Cold is the best Local
remedy we possess - it may be applied in various
ways, either by applying cloths wrung out in cold
water, or bladders filled with ice to the part or what
is still better by pouring water on the part from
the Spout of a Tea Pot from a height — cold injec-
tions up the Vagina or as some prefer up the Rectum.
Opiate Enemata are very beneficial —
but when it is difficult to stop the flow of blood
by the ordinary means we must then resort to the
Tampon —

Passive Form of Hæmorrhagia Uterina

In this form of the disease we have a vitiated condition
of the System - the respiration is hurried, the countenance
pallid - skin hot - edema of the lower extremities
especially in the evening — acute or sometimes dull pain
in the lumbar regions & back —
When the effusion of blood is very profuse it must be

checked by Venesection, but in this affection should this be local congestion, we must not use the lancet, but resort to topical bleeding as Cupes over the lumbar region.—

Nitras Potassæ may be now used & is the only one of the class in which C places any confidence—Given in the dose of 2 to 5 grains with a small portion of Opium frequently repeated—

Kino—Rhatany wort in the dose of 30 gtt of the Tincture—also Tr Cinnamon; in the dose of a teaspoonful. Gallic Acid—Elixir Acid or Sulphi Acid in dose of 10 gtt have been recommended by some as being very useful.

Emetics &c recommends as one of the best remedies we have in this affection acting on the principle of Revulsion.

The flow of blood having been checked, we must prevent its recurrence, by the restoration of the natural function of the uterus—by careful avoidance of the exciting causes, sexual intercourse being a fruitful source of this disease it must be prohibited, & so must every thing else which has

a tendency to reproduce the disease —
Should the patient be plethoric she must lose blood either generally or topically —
Rest is indispensable in the treatment of this disease —
Abstemious Diet is the only one that can be allowed.
The use of Emetics will be very beneficial —
Cathartics and especially those that act on the lower bowels as the Aloetic preparations are useful to with the most decided benefit, They are to be given in small doses, not so much as evacuants, but they produce their good effects by Stimulating the uterus which is transmitted by Sympathy to the Uterus & restores the relaxed vessels to their healthy action — Savin is recommended by some —
Having put a stop to the discharge of blood & restored the uterus to its healthy action & renovate the strength of the patient by the use of Tonics — Cinchona is so much prescribed & may be useful especially when the discharge observes the law of periodicity — Bark ℥i digested in lime water 2 or 3 days & give a wineglassful 2 or 3 times a day — Sulphas Quinine is still better —

But on the whole the Martial Preparations are to be preferred of which Phosphate of Iron is the one to be chosen in preference to the others - but all are in high repute -
Mercury with a view to its alterative effects has been recommended as a dernier resource, but must be cautiously given, it does not answer in strumous, or much exhausted patients, but may be used in persons of a contrary condition -
Dry Cupping. Blisters to the Sacrum are useful -
We may recruit the health of our patient by allowing her a generous Diet - Cold Bath - and Moderate Exercise
Prophylactic treatment. When this discharge occurs periodically - we should anticipate it a few days before expiration perfect rest. Cupping the back - bloodletting & by such means we may be often able to prevent an attack -
About the time of Cessation of the Menses, instead of Menses we often have pure blood & a constant oozing takes place, this is indicative of an incipient Schirrus, with acute pain & heat in Uterus, small but constant discharges - pain sometimes ~~small~~ acute & at others times dull - extending to the back or thighs. All the symptoms gradually increasing, examining per Vaginam, we find os uteri hard & thickened, it then

becomes an Object of much importance to relieve this condition of things - we must resort to general & topical bleeding, especially from the gums & around the Tubes. An alterative course of Mercury with the Narcotics. Dr Rush's practice was to put the patient to bed & nourish her with only Milk. When Cancer appears we must use Narcotics &c but then it comes with more properly in the province of Surgery.

September 7th 1835

Hydrops

The proper location of this disease, is a hard matter to determine, it has been often changed by the different writers on the subject, but Dr C has come to the conclusion, to class it with the Hemorrhages, with which, he says, it bears the closest analogy in every aspect. Generally Dropsy is the product of the serous and cellular tissues.

Symptoms. This disease is divided according to its situation into Hydrocephalus. Hydrothorax, Ascites and Anasarca, each of which has Symptoms peculiar to themselves, but they all have the following viz; Pale complexion, Skin dry and of a doughy feel, & harsh — temperature low, urine scanty, bowels costive, appetite and digestion impaired, pulse vigorous or otherwise, languor and disinclination to mental or corporal exertion, somnolency, emaciation rapidly ensues, palpitation of the heart, respiration laborious.

Sometimes the disease comes on suddenly, and runs its course rapidly, at other times, the reverse is true

No age, sex, temperament or emotion is exempt from Hydrops, it however, generally attacks those that have passed the meridian of life, & males are more frequently the subjects of Hydrops than females, those of the Phlegmatic rather than those of the sanguine temperament - those of the higer than those of the lower order of society -

Causes. This disease has been produced by the cold bath as also by the warm bath, flatulent colic, a draught of cold water has immediately excited the disease, checked perspiration, commonly it is the result of an anterior disease, in this country it is usually the ~~result~~ sequel of imperfectly cured Intermittent, Dysentery, Diarrhea, excessive purgation, of affections of the Lungs, heart & large bloodvessels, irregular or misplaced Gout, inordinate profluvia of any Kind, abuse of Mercury, state of the blood itself -

This is a disease of no easy cure, under whatever aspect we view it - when of long standing, we must be content to mitigate, as much as possible, the symptoms, it is only in

edema, that we can predict certain cure.
Post Mortem appearances. The tissue concerned exhibits appearances of Phlogosis, or it may not as the turgescence & redness may have been removed by effusion, sometimes we find an ~~exsanguineous~~ exsanguineous condition, or structural derangements in alimentary Canal viscera &c &c.

Pathology of Hydrops is as yet unsettled, the fluid is not the same as that of exhalation, differs materially from pure serum, is said by Good to be of all colours & consistency, therefore it cannot take place from mere exhalation, some consider it as arising from too great action of the exhalents & or diminished absorptions, but Dr Esq says that it appears to be a diminution of absorption, it is often very acute as we may judge from the rapid emaciation which takes place, although we do not know the condition of the absorbents in the cavity affected — but an excess of fluid is no evidence of diminished absorption Dr Abercrombie to decide this point concludes that the same activity is not present, or there may be a disinclination on the part of the absorbents to

take up the fluids, on account of a disposition to absorb some fluids in preference to others.

Dropsy of every description depends upon a preternatural effusion of fluid. Which depends upon an antecedent Pathological condition, it may arise from a Disorder the irritation of which extending to the other Organs produces a pathological condition in them, on account of which. This fluid is secreted.

Dr C believes Dropsy to be the the result of inflammation, he is aware that it is the consequence of congestion, passing a ligature around the extremities a more careful examination exposes the error, & will show that this is owing to the inflammation excited by the above means, Dropsy must depend upon a lesion somewhere.

Treatment. Hydrops may be the result of inflammation of various grades of violence, and therefore the treatment will be different in different cases, Evacuation of the fluids is generally the first indication, but Dr C does not approve of it, but that attention should be paid to the pathological condition of the organ which secretes the fluid.

During the inflamonation, bloodletting both general & topical should be practiced.
Saline purgative are to be preferred to all
other cathartics. Drastic purgatives sometimes necessary
Rest & proper regimen—
Sinapisms are very useful in this disease.
Diaphoretics may sometimes be used with
advantage.
Mercury has also been productive of
good effects—
In cases when the patient is in a weak or
debilitated condition, it may be necessary to
resort to Tonics— Stimulants &c
Should we succeed in removing the effusion,
it will rapidly return, unless we destroy the
Pathological condition that occasions it.

Ascites

This is a dropsy of the abdomen, sometimes primary, derived from the Greek, caused on the Peritoneal sac - mutum, blown the viscera and membrane suddenly as a primary disease, but generally the accompaniment of some other disease.

Symptoms, are nearly the same as those of Peritonitis in its subacute or chronic form — the chronic one, progress is slow, & often scarcely to be recognized, usually preceded by.

Sallow complexion, doughy integument, bowels costive, often in suppressed urine deposits Cateritious sediment, flatulency, sour eructations, swelling of the feet, breathing short, swelling of the abdomen this always commences at the Epigastrium, we then have an aggravation of all the symptoms, palms of the hands & soles of the feet become hot & husky skin constipation, great & almost unquenchable thirst - dry cough respiration very laborious especially in the recumbent posture, frequently we then have effusion into the cellular tissue constituting an universal dropsy - the pulse at first, sometimes full & strong, & accelerated, much fever the heat at other times the reverse is true, the pulse being small & weak - no fever in second stage contracted at the close of the case the bowels often give way, the tongue becomes red & dry, finally death takes place from exhaustion, suffocation or Synocope -

Causes, are pretty much the same as those of Peritonitis, although more graduated & slower in their effects.

derangements of the liver & spleen are fruitful causes of this affection — and can form it with Pregnancy — very obstinate cases. it often mistaken

Diagnosis. The condition which is most likely to be mistaken for ascites is Pregnancy, but by a careful examination of the history of the case & the symptoms we will be able to form a correct diagnosis, from Pregnancy it may be distinguished by the fluctuation of the water in Ascites, which may be made very evident by placing the left hand on one side of the abdomen & striking the opposite side with the right hand, when it is an encysted dropsy this is not the case, the fluid in ascites commences at the Epigastric region, while in Pregnancy it commences at the Hypogastric region, sometimes it is connected with Pregnancy. but this is not infallible especially when making an examination per vaginam. in all cases where there still remains any doubt on the subject, we should make an examination per vaginam.

It may be distinguished from Tympanites, as in the latter all the characteristic symptoms of Dropsy are absent in Tympanites the abdomen is more tense & elastic on percussion, frequent belching, colic pains, Cases of encysted dropsy sometimes resemble Ascites, but the diagnosis of this will be given at a some future period —

~~Chronic~~ being the result of acute peritonitis
it is easy of management.

Paracentesis. The difficulty of cure depends greatly upon the condition of the patient, it is very fatal in children & old persons, also unfavourable when we have great emaciation, dyspnoea, a tendency to syncope, oedema of the feet & legs, diminished deglutition, asthma, colliquative diarrhea, the urine is favourable of course. freedom of micturition, chronic discharges removal of obstruction change of vesicular in chronic favourable) Ascites must always be considered a very formidable & dangerous disease, & unless there is great integrity of constitution generally proves fatal.

Post Mortem Appearances. In acute forms the vessels are accumulation of fluid
Peritoneum is inflamed, & in Chronic it is thickened & studded with tubercles, the glands are hardened or granulations of Hydatids
bowels adhered, & obliterated or ulcerated, the Stomach
in a cancerous condition, but frequently no
rarely cysts. kidneys sometimes affected
change can be detected in the solids, the blood alone appears to have undergone a change by the loss of its crassamentum, when the effect of sub acute inflammation. pus is secreted, & transudation of lymph & this in common with all the dropsies may escape from the exhalents in the same manner as Haemorrhages
ordinary case - effect of Constitution -
Treatment - The effusion in dropsy is only the effect of a pathological condition of the parts, & our remedies

must be directed to that condition of things, which gives rise to the effusion & at same time to the removal of the fluid. In that form which is the ~~sequel~~ attendant with inflammation, Venesection must be practised but with judgement & caution, in this you must be governed by the pulse & appearance of the blood &c and should symptoms seem to require it we must repeat V.S. again and again. Topical bleeding by Leeches will be very useful where there is tenderness of the abdomen, this may be followed if necessary by Vesication. not a new remedy — to be alone trusted Purgatives are necessary — poultices fomentation not to be alone trusted

The preceding treatment is intended to cure that Pathological condition of things, which produces the effusion and now it is our object to get rid of the effusion, but there is in a cavity opposite in structure — peculiar or an not a worse symptom in the disease, than the fluid passing secretion and finding that cavity too rapidly, exhaustion & quickly follows. per vias naturales by P. S. — Dr C says he has seen the fluid in excessive discharged by the umbilicus & Vagina also. — by the urinary bladder by a species of hysterical vomiting & discharged it Emetics were once much employed sometimes frequently 2 modes — for the effusion to escape — I believe of good effects, but C does not know their modus operandi in every case — fluid may react by peristaltic and this case he ascribes their good effects to their evacuating the ~~escape~~ by the alimentary canal — state of the intestinal vessels, they may be used with caution elimanates. by the bowels, skin, secretions, urine &c.

Dr C - do not please think the fluids into the circulation if it did the pulse ought to indicate it. whereas it sinks in the early stage, he very seldom prescribes them in Cases to diminish almost instant Death

except when there is great derangement of the stomach & much torpor of the system, & general insensibility to the operation of Medicines - We have great an Horror for the practice

Purgatives, Evacuations by the bowels, are deemed of the greatest service, & many practitioners rely almost exclusively on them, it was the practice of Sydenham to purge daily unless prohibited by the debilitated state of the patient under his

Saline Laxatives are those generally prescribed, but perhaps the very worst - care in the selection

best purge is Draughts Purge - or decoctions in the early stage

℞

Super tartras Potass - - - ℈i ℥ℓ

oil of Cloves gtt. ii Pulv: Jalap - - - gr x ℈ℓ 10-15

with this one may keep up a continual evacuation from the bowels. The remedies are prompt - and efficient

I wish to call it to your attention - decidedly

Magnesia, Sulphas magnesia, or Castor oil either may be employed as purgatives.

Drastic purgatives may be used where there is great torpor of the alimentary canal.

Diuretics, are of very little use in the cure of Hydrops the only way in which they can be serviceable is to excite the absorbent system. From the reduction of the circulation - you must excite the absorbent system

I have seen A purge throw the stomach -

78 Medicines called Forbes Tr

Articles that act upon the absorbent system, Carbs. Potash.
Acetas Potash was once held in great esteem / Sal Diuretic
Nitras Potash, is well adapted to this stage of dropsy, its utility
is owing to its depressing or sedative power, It may be combined with Antimony, when there is much vascular excitement. drink it during the day — can be used with the Sulphate or Tartrate of Potash may be used, there is no material difference in their effects, their union is a valuable remedy.

Spts Aetheris Nitrosi. is of great use when freely exhibited in doses of Zij. small doses of this articles are of no utility whatever. when it causes Perspiration, this is one of the best from Dropsy from cold or suppressed evacuations

Diaphoretics. Dover's Powder will be found one of the best of this class. The following Mixture will be found useful & may be taken at a dose.

℞ Tr Opii — gtt xl

Spt Aeth. Dulc. Zij

Vini Antim. gtt xl

Aquae ad Zvi

Give every 2 hours — 3ss to be mixed and kept — Zi

Opium. A decoction of Expectorants, is very good. Vapour Bath. this process (sweating) is of more utility than generally supposed &c

Covering the body with hot Sand is used

In the chronic form, when the system is much reduced depletion is to be avoided, exceptions however exist, & we must not allow ourselves to be deceived by apparent debility. The objections to Diaph. are futile, we divert action from the interior to the exterior — Quality absorption sometimes it may be necessary to resort to Topical bleeding, blisters & active cathartics, as Jalap. Scammony & Elaterium Combined in the chronic cases, Elatin is generally preferred to Elaterium, it is given in doses of 1/16 or 1/10 of a grain every 2 or 3 hours till purging is induced. Tincture with the Muriated nitrate of Croton Oil is an excellent cathartic in doses of 3 to 5 drops every two hours — This mixture will be found useful, dose table spoonful

℞ Pulv. Gamboge gr iv
Cabinet sodæ ℈ 1 — Elatin gr ss
Decantin Spts Nitr Dulc — ℥ i
Table Spn — every 2 hours Aqua ad — ℥ iv —

This is prompt & efficacious as an evacuant of fluids & will be very useful in every form of Chronic Diarrhœa.

Digitalis. This is best adapted to a nervous state of the system, best given in infusion, the following mixture in dose of a table spoonful every 2 hours till it purges, will be found of great value —

℞ Digitalis gr xv
Aqua Bullientis ℥ viii
Macerate for 2 hours & strain

℞ Infusion Digitalis ℥ iii
Tinct Opii gtt xx
Aqua Menthæ Pip ℥ iii
Syrup Simplex ℥ i
Misce

Dose a table spoonful every 2 hours until nausea or vomiting is produced after which the dose is to be diminished to a teaspoonful every 2 hours — This is to be of great advantage

80 The Ammoniacum + Senna ware not strong

80 Rp

Infusion of Digitalis	℥viij
Tartarite Potæ	℥ij
Carb: Sodæ	℥ij
Spts Nitri Dulc	℥i
Tr: Scillæ Marit:	℥i
Ol: Menth:	gtt viij

Tobacco has been recommended but not used by Dr C: Dr prefers in doses x or xx drops

The next is a valuable mixture in dose of tea spoonful

22. Rp Oxymel Scillæ Marit:
" Colchicum — ā ā ℥i
Tr Tobacco
Spts Nitri Dulc ℥i

Colchicum

+ purge every morning with Super Tartr. Potas:

Indian Hemp is a most powerful agent, it excites vomiting, purging, diuresis, but Dr C declines giving an opinion as to its utility in dropsy, although it has been recommended by others — Dose — ℥i ad ℥ij ad ℥ij

Mercury, this powerful agent, owing to its indiscriminate employment, has probably done fully as much harm as good, it is only appropriate when there

is integrity of constitution, & chronic inflammation, but not when there is acute inflammation or bad habit of body. cautiously administered it alike removes the cause & effect. it may be given pure & then Calomel or blue pill is to be used, although it is generally combined with other articles, as with Squills &c.

Iodyne which is in some respect similar to Mercury, & must be used in the same state of system as Mercury has also been recommended, & from its action on the absorbent system we might expect much from its administration, but it has always been disappointing in his trials with the article.

Nitro-Muriatic Acid, has been found beneficial in producing absorption &c.

There are other articles which are denominable, by rectifying the general condition of the body as Sarsaparilla & its congeners. But when the patient is debilitated Tr Canthorides may be used in doses of 8 or 10 gtt, which is only temporary.

Onions, Garlic &c. Rf Mustard seed ℥iv Carb-soda
This mixture is to be boiled Garlic ℥iv Dandelion ℥ij
15 minutes, in a flapped way Horse dish Centaury ℥iv
2 or 3 hours, very useful in Drunkards. Horse radish Ovj

Phosphate of Iron is much to be depended on. The direct means of evacuating the fluid will be given in my next. subject continued.

This is done by an operation, it is admissable only when the distention has become so great as to give great pain, and cause disturbed respiration, the former means failing a cure may possibly be effected by tapping, provided the lesion is not very great, the operation itself affords but a temporary relief, but our Medicines operate to more advantage afterwards, some have injected the cavity of the chest, with Stimulating fluids as in Hydrocele, but with no good effect, all such trials having failed.

(Dr Good tells of a case in which the individual was tapped 98 times in three years, the quantity of fluid drawn amounted to 116 gallons.)

The application of a large blister Dr C says he has seen productive of good results, it is difficult to account for the operation of the blister.

Encysted Dropsy is a collection of fluid in sacs, the ovaries are principally liable to it, Dr C having never seen the disease in any other situation; on some occasion the progress is slow, commencing with pain and irritation in the part, fever at other times the progress may be more rapid, No period of life is exempt from it, it usually occurs about the period of the cessation of the Catamenia,

Causes. This disease may be produced by Hydatids, blows, falls, inflammation of the organs &c

Diagnosis, This may be distinguished from Ascites, as the swelling in the latter is more general, in the former it is local, confining to one side, Moveable, Menstruation continues, which is seldom the case in Ascites,

Prognosis, Tapping early in hand it may be attended, but if it be allowed to proceed, especially when connected with Hya it will often terminate fatally, it may however exist for a long period (Dr C relates two cases in which it has existed upwards of 30 years) & the patient enjoy very good health.

D. D.

Dissections reveal to us the following appearances. The Peritoneum distended to an enormous extent, Sac filled with a pellucid fluid, sometimes of an ochre & sometimes another

fluids gelatinous, very offensive, the fluid is rapidly replenished &c. Pathology great obscurity exists as to the pathology of this disease, in words there is nothing intelligible as regards it. It is a local dropsy, the proper seat of which is in the peritoneum investing the ovary, caused by any irritant to it.

Treatment. Bleeding general & local may be employed with great success. Succession of Blisters, to be followed by a course of Alterative Aperients. Effusion having taken place, the case may be deemed hopeless, we can give nothing, that will remove the fluid, tapping is only palliative.

Fluids are sometimes deposited in the cellular tissue between the Peritoneum & parietes of the Abdomen. No Diagnosis can be drawn between the two affections. except perhaps that in this there is an entire absence of the Hydropic Diathesis & symptoms, to be treated with Cups & Leeches, purging affords no relief whatever, Tapping &c. No good results from Tapping.

Hydrothorax is a dropsy of the serous tissue of the chest, It usually occurs in the aged & infirm, and those with broken down constitutions, are usually the subjects of this form of Hydrops, it rarely occurs in other persons.

Symptoms, Disorder in the digestive functions, dull pain at the Sternum, respiration laborious, especially when ascending an acclivity, cough at first dry & Expectoration, pulse hard, full & irregular, sometimes accelerated, swelling of the feet & hands, thirst, diminished flow of urine, bowels costive, little appetite, sleep ~~restless~~ interrupted by alarming dreams, difficulty of breathing almost to suffocation, palpitation of the heart excited by the slightest motions, face & extremities cold, pain in the arm extending sometimes down to the fingers, lips livid, clammy sweat, coma, & at a later period, we have bloody Sputa, &c Then is frequently an interval of comparative ease, but it is easily excited to another attack, is apt to take place every evening, this disease has its grades of violence, it may exist for some time without exciting suspicion.

Death occurs by exhaustion, difficult breathing or sometimes it occurs without any assignable cause, it has occurred from & simply changing the position of the

patient. Causes, it may occur from a primary Phlegmasia of the pleura &c follows asthma, & Catarrh in aged persons, it is the consequence of affections of the heart, aepellia eruptions, Pleurisy &c

Diagnosis, Few diseases are more difficult to distinguish it may be confounded with Abscess, emphysema, Angina Pectoris, Asthma, Phthisis &. Sometimes it is impossible to establish a Diagnosis, the pallid face, intermittent pulse, cold & alternations hand & feet, hiccup, starting in the Sleep. but these cannot be implicitly trusted, there are two circumstances indicative of the existence of fluid viz. stripe the Sternum in the erect posture & you will perceive the fluctuation, Or squeeze the Abdomen & you cause suffocation, the least of which is most to be depended on, though not always the same occurs when there is pus or serum present. Percussion gives a dull sound on the affected side, though not always, the Stethoscope may be used, this also is liable to deceptions, the sound is like the bleatings of the goat, in the later stage the sound is not heard, strict attention to the History of the case in conjunction with these aids may lead us to a correct Diagnosis

It generally happens that the effusion is confined to one side of the chest, & consequently there is an enlargement on that side, Edema in the Lower limbs of the opposite side.

When the effusion has taken place in the Pericardium I know of no certain diagnostic sign, respiration becomes more laborious on any kind of motion, pulse quick, extremely irregular, pain near the heart, anxiety of Countenance, bloated face, Oppression across the chest, the patient is much disposed to leaning on a chair, in dropsy of the heart this is the most certain sign, unless the effusion is very great, little advantage is to be derived from Percussion, when effusion is great the percussion is very evident. Most of the cases of Hydrothorax terminate by effusion into the pericardium, when they determinate fatally.

Cullen pronounced this disease incurable; when it is connected with any organic lesion, or occurring in very old persons, or in depraved Constitutions, it may be said to be incurable, but when it is the result of Pleurisy it is under our control; Cases however do occur, in which recovery takes place when least expected.

Post Mortem Examination, exhibits the pleura variously

diseased, thickened, sometime healthy, the heart, bloodvessels, and viscera of the abdomen all sometimes also implicated, effusions into both cavities of the chest would cause such a compression of the lungs that death would immediately take place,

Pathology is the same as Ascites &c.

Treatement, In the early stage when the disease is inflammatory as shown by the pulse, pain in side &c; we can not mistake the course to be pursued, Venesection is to be practised liberally, diseases of the lungs require more bleedings than those of any other organs,

Cups and Blisters to the back.

Nitrog Potasse in conjunction with Antimony.

Squill in combination with Calomel, Mercury should be given with a view to its Specific effect, for the manifestations of the influence of Mercury, such as sore gums, is an auspicious sign, just merely touch the mouth.

Digitalis, I say the more he has tried this article, the less he thinks of it, his disappointments with the article have been so often, that he now rarely resorts to it, in some cases however it is possessive of good effects,

Colchicum sometimes very good

Dropsy of the heart, the treatment is the same, with a perfect degree of Rest, which is all important, the following Mixture may be used, R. Elaterii ---- gr i

Spts Nitr: Dulc - ℥ij

Tr: Scill: Maris ℥ss

Oxymel: Colchici ℥ss.

Syrupi ℥i

℞ this may be taken in doses of a teaspoonful, every three or four hours.

Enactics have been recommended by some, but they are not of much value, except to relieve the lungs, great advantages may be gained from them in nauseating doses.

Purgatives are seldom employed, but Dr C thinks highly of them especially in women, women have more tenacity of life & allow of longer and greater freedom of evacuation from the bowels than men, Drastic Purge are preferable, Elatin in doses of ½ or ⅓ of a grain every hour. Croton oil is also much to be depended on but not so much so as Elatin.

Expectorants are palliatives only but with that view they are serviceable, & sometimes they promote absorption, Squill, Senega &c &c &c.

In the Chronic Stage little need be said, it is often uncontrolable, we must use blisters, local bleedings, together with the articles just mentioned.
Puncturing the Thorax, has been resorted to but before resorting to it we should be apprised of the effusion, the only certain sign of which is fluctuation, the operation has been performed with success. in one instance between 400 or 500 pounds were drawn off in a year, the fluid accumulates rapidly.
Injecting the the pleural cavity has also been tried, for some time it appeared to do well, but suddenly the patient died, but it is warrantable practice.
The pericardium has also been tapped.

Hydrocephalus (Internus)

This disease was not known to the Ancients, the affection was applied by the Greeks to an oedema of the scalp, and afterwards extended to effusions into the cranium, hence arose the division of Internal and External. The common division of the disease is into Acute and Chronic. Children are chiefly liable to this disease, and girls more than boys.

Symptoms, The first stage is often very insidious, languour, furred tongue, thirst irregular bowels being either torpid or loose, high coloured urine, dark lines under the eyes, uneasiness in the head, tumid abdomen & soreness on pressure, sleep disturbed, & inquietude during day & night. duration of this stage is not uniform. we next have vomiting, dry or moist tongue, hot skin, Acute headache, pain in the back of the neck, soreness of the hands & feet, throbbing of the arteries, head much affected, dry nostrils, parched lips, patient screaming on being awoke, pulse active, heaving of the head, pupils dilated or contracted, bowels constipated, stools watery or clay coloured, or mixed with green, or covered with oily slime this is a very good sign; urine scanty interrupted sleep, partial.

delirium, when raised up, sickness, any cough from nervous irritation, the disease progressing we have opposition from effusion, all the symptoms augmenting more rapidly, dilated pupils, unmeaning motions of the head, peculiar spasms confined to one side at a time, respiration laboring, involuntary discharges from Rectum & bladder, remaining in this condition for some days & then face pale, sunken eyes, film on the surface of which, moistened forehead, &c death usually takes place 10 or 15 days from the beginning of the attack, Cases occur without any premonitory symptoms & the patient is convulsed in a few days.

Causes. It may be the result of protracted fever, there are no fevers, that are not liable to terminate in dropsy of the Brain, it may occur from Metastasis, this cause is too much neglected, some peculiarity in the physical constitution, fulness, what tends more to its production is that the Arachnoid Membrane cannot support high inflammation, if the inflammation is very intense no effusion takes place, irritation of the brain Brain from dentition, diseases of the digestive organs, sudden suppression of eruptions &c

Diagnosis, Symptoms. is very difficult inclination to vomit, constipation, aversion to light, noise in the ears, peculiar alvine evacuations, patient more easy in recumbent position, from this you may suspect, but can not be certain

of the disease, some advantage to know whether it is a primary or secondary affection, you may prevent but cannot cure it, being excited by an irritation in the bowels it is more manageable than when confined to the Brain, it may be cured before effusion takes place but after that the case is almost hopeless. confusion of the head, a bad symptom, contraction of the pupils, pain in back of the neck, a most unfavourable symptom, when the pain & then recovery is seldom or never, convulsions & change are fatal denoting decay of cerebral energy. The favourable symptoms are the reverse of these, the last equivocal signs are diminution of the inflammation, defluxions from the nostrils very good, Dr C says never has a patient, from the beginning of the world to this present day, recovered from delirium & where that sign was wanting.

Dissection gives great diversity of appearances, as an inflamed Arachnoid Membrane, minutely injected & thickened, the substance of the Brain is sometimes involved in same inflammation, extravasations, occasionally there is a membrane secreted, congestion of the vessels often met with in Calvaria especially, substance of the Brain is friable, softened & enlarged, Ventricles Fornix is implicated & sometimes is wanting, effusions into the and between the Membranes, and convolutions of the Brain, or a thin, pellucid turgid

repy or bloody fluid, improperly called Lymph. Tumours & abscesses are sometime found, this is accidental, & to be considered more as effects than causes of Disease, derangements in the Chylopoietic viscera, inflammation especially in Stomach and Hepatic apparatus. Pathology is the same as other Dropsies, allowance being made for the locality & structure of the parts concerned, it is not true that this is the same as Arachnitis, the effusion is not merely one of its proximate effects, the affections of the alimentary canal have a great influence over disease of this nature.

Treatment, this differs according to the stage of the complaint, when there is inflammation, it must be removed by Bleeding, evacuating the alimentary canal, Mercurials, purges are to be preferred, Rest & Diet, irritation is often removed by small doses of blue pill worked off with Oil, but More energetic measures are demanded sometimes, When Venesection is the remedy but the Crasis of blood is badly bore, Topical bleeding by Leeches is to be preferred. or opening the temporal artery, Cold to the head & Stimulating pediluvium often renewed, Heat purgatives are very important, its superiority is generally conceded, Calomel preferred, when worms in the intestinal canal are Suspected, use infusion of Spigelia, & Senna. Emetics have been too much neglected, they are very useful, James Powder in Minute doses, Diaphoretics by diffusing the excitement, are beneficial.

Blisters first to the neck & then to the whole head & remain on 24 hours or until suppuration of the scalp takes place, without which they will be of no avail, this practice has been objected to by some but D.C says that he is certain of its propriety from experience, it was the practice of Dr Rush who was the best practitioner of Medicine I ever knew say D.C. if you shave the head 2 or 3 hours before the application of the blister, you will greatly prevent strangury.

Just about the time the effusion is taking place we have much restlessness, irritation, spasms, exhaustion, pulse feeble, skin cold, great reliance can then be placed on Opiates, Cash Ammonia, Brandy &c, they act by exciting high degree of inflammation & thereby prevent effusion, which (effusion) having taken place to any extent, there is little hope for the patient, as Lymphatics in the Brain are very scarce if they exist at all, for the purpose of causing absorption, Digitalis is recommended, but I prefer Mercury, this is to be used freely both internally & externally as an argument.

In the Chronic State, the system is in an opposite condition to the preceding, Children of a Strumous habit are generally the subject of this form. bad habit of body, skin dry, depraved appetite, imperfect digestion, torpid bowels, deficient urine, tumid painful abdomen, emaciation, effusions may have existed before we suspect them. Venesection is here inadmissable

Cant in the early stage we may employ Leeches, Blisters + but our chief reliance is on Purgatives, Mercury, Squills, Digitalis, danger is to be apprehended from Mercury.

This sometimes occurs as Congenital sometime impeding Delivery, + increases for Months and Years + sometimes it runs to found 2 or 4 Gallons of fluid in the Cranium, the shape + organization of the Brain is altered, the faculties are attained, in this form Medicines are destitute of utility + the case must be resigned to Surgery.

Anasarca

This is the name for Dropsy of the cellular tissue but when it is only partial (as for instance confined to the feet) it is called Oedema, Anasarca commences with swelling of the feet & ancles in the evening, Skin pale & when pressure is made in the body, a pit remains, the swelling ascends, occupies the thighs, trunk, face, eyelids, &c bowels constipated, pulse small and corded, great thirst, low fever, Surface cold of a waxen appearance, Gangrene, effusion internally. effusion extends itself rapidly. Complicated sometimes with Hydrothorax - constituting universal Dropsy.

Causes. this may be produced by any interruption of the circulation - reciprocity often take place between this & the other forms of Dropsy -

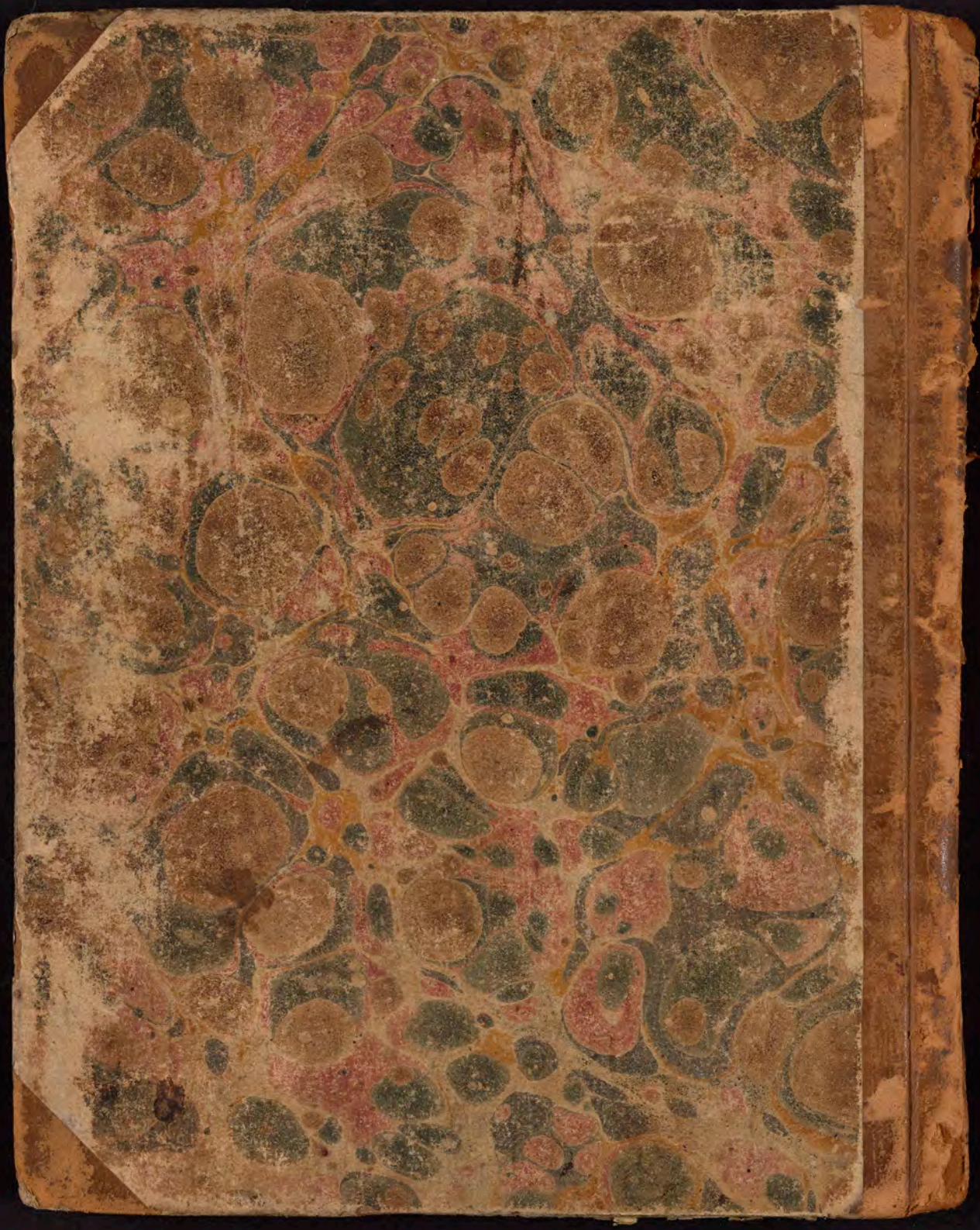
May arise from exposure to cold, excessive loss of blood, this is far more curable than any other form of Hydrops, it usually submits very readily in the Acute form the cells are small & contracted, in Chronic the reverse is the case - The effusion is the product of a slight inflammation of the cellular tissue, but it sometimes takes place without any excitement, but merely from the pathological condition of the Capillaries, as in the other species of Hydrops,

Treatment. ~~is~~ The same remedies as in other Dropsies, with some exceptions, are here commanded, Mercury is not so admissable. Diaphoretics are of much importance, frictions, enveloping the parts in Oil cloth will be found beneficial, it acts by exciting the action of the exhalents & in this way remove the disease, Application of Cabbage leaves, or leaves of the Tulip Poplar is often beneficial -

There is a great disposition for the fluids to leak as it were, through the pores of the Skin - Small punctures may be made so as to let out the fluid, taking care that they are not made too deep, ~~not to puncture~~ Gangrene taking place in patients afflicted with Anasarca is difficult of Management, Blisters are here of no general utility, for often they produce the evil they were intended to remove, Compression with a Flannel roller above & below the gangrenous parts will be found very useful the Gangrene, &c has been cured in which Blisters were of great utility - Attention must be paid to the Regimen & Diet of these patients.

— Finis —

"
The happiest man in the world, is
love with himself, and without
a rival"

"
Woman, but another name for
falsehood, treachery, perjury & hell

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